## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	04-23-07	Address:	1/2 mile N of CR 200 on
Case #:	<u>96-02261</u>	•	Township Road
County:	Gibson		Rural Owensville, IN
Type of Laboratory Scizure (check one)  Operational Lab		Seizure Location (check all that apply)  Residence Hotel/Motel	
	al/Glassware/Equipment (only)	Outbuilding Vehicle	Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)  Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: woodline			
Water Reactive Metal (Lithium): woodline			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s): woodline			
Corrosive Acid;			
Corrosive Base:			
Other (item and location):			
	er age 18 discovered (check one) (number present)	Ephedrin	e Information c/Pseudoephedrine Tracking Log erchant Tip
*If yes, fax to	port to Child Protective Services	Other:	
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	ment: Owensville FD	Fax: maile	_
Health Department: Gibson County		Fax: <u>812 3:</u> Fax:	
Child Prote	ction Service:		•
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Mol Dexter Phone 812 867-2079			

This form is to be faxed to the Pirc Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.